

# Adult Health and Wellness Guidelines

## Females Ages 50+



## State and School Employees' Life and Health Insurance Plan

**Not Subject to Calendar Year Deductible • 100% of allowable for covered procedures**  
**Payable only for Network Providers and for Blue Plan Providers (outside Mississippi)**

| PROCEDURE/FREQUENCY  | CPT CODES ACCEPTED FOR EACH PROCEDURE  |
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| <b>Preventive medicine evaluation, re-evaluation, or office visit.</b><br>Two (2) visits per year<br>Blood pressure, one (1) procedure per year<br>Breast exam, one (1) procedure per year | 99386, 99387: Initial preventive medicine evaluation<br>99396, 99397: Periodic preventive medicine re-evaluation<br>99201-99205: Office or other outpatient, new patient<br>99211-99215: Office or other outpatient services, established patient<br>G0402: initial preventive physical examination, face-to-face visit, services limited<br>G0438: Annual Wellness Visit; includes a personalized prevention plan of service, initial visit<br>G0439: Annual Wellness Visit; includes a personalized prevention plan of service, subsequent visit<br>S0610-S0613: Annual gynecological examination. |
| <b>Hemoglobin, hematocrit, or CBC.</b><br>One (1) procedure per year   | 85018: Hemoglobin<br>85013, 85014: Hematocrit<br>85025, 85027, 85032, 85041, G0306, G0307  |
| <b>Urinalysis</b><br>One (1) procedure per year  | 81000, 81001, 81002, 81003: Urinalysis   |
| <b>Immunizations/TB skin test as needed</b>  | See Immunization Codes   |
| <b>Pap smear and pelvic exam</b><br>One (1) procedure per year   | 88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88154, 88164, 88165, 88166, 88167, 88174, 88175, G0101, G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148: pap smear<br>87620, 87621, 87622 (HPV testing) when performed in conjunction with pap smear  |

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| <b>Lipid Profile</b><br>Includes Cholesterol, Serum, Total (82465) lipoprotein, Direct measurement, High density cholesterol (HDL Cholesterol) (83718)<br>One (1) per year | 80061: Lipid Profile  |
| <b>Mammogram</b><br>One (1) procedure per year   | 77051, 77052, 77053, 77054, 77055, 77056, 77057, G0202, G0204, G0206, S8075: Mammography<br>Provider interpretation for mammography<br>(77051 and 77052 if used in conjunction with primary mammogram procedure code)   |
| <b>Stool for Occult Blood</b><br>One (1) procedure per year  | 82270 thru 82274, G0328, G0394: Blood, occult, feces, 1 - 3 simultaneous determinations   |
| <b>Flexible Sigmoidoscopy</b><br>One (1) procedure every five (5) years or<br><b>Colonoscopy</b><br>One (1) procedure every 10 years                                       | 45330, 45331, 45333, 45338, 45339, 45346, G0104, G6022: Sigmoidoscopy, flexible<br>44388, 44389, 44392, 44393, 44394, 44401, 45355, 45378, 45388, 45380, 45381, 45383, 45384, 45385, G0105, G0121, G6019, G6024: Colonoscopy<br>88305: Pathology of polyps if colonoscopy is paid under wellness. |
| <b>Glucose</b><br>One (1) procedure per year<br>For high-risk individuals only   | 82947: Glucose, quantitative<br>82948: Glucose, blood, reagent strip<br>82950: Post glucose dose<br>82951: Tolerance test (GTT), three specimens<br>82962: Glucose, blood by glucose monitoring device(s)<br>36415 and 36416: Routine venipuncture  |
| <b>Diabetes Screening</b><br>One (1) procedure per year  | 83036-83037: Hemoglobin; A1C  |
| <b>Gestational Diabetes Mellitus Screening</b><br>One (1) per pregnancy<br>For asymptomatic pregnant women after 24 weeks  | 82947: Glucose, quantitative<br>82948: Glucose, blood, reagent strip<br>82950: Post glucose dose<br>82962: Glucose, blood by glucose monitoring device(s)<br>36415 and 36416: Routine venipuncture  |
| <b>Osteoporosis in Postmenopausal Women, Screening</b><br>One (1) every two (2) years<br>Ages 60+  | 76977: Ultrasound Bone Density measurement<br>77078-77083: Bone Density Study<br>78350-78351: Bone Density Study  |

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| <b>Breast and Ovarian Cancer Susceptibility, Genetic Risk Assessment and BRCA Mutation Testing</b> | 81211-81217: Ovarian/Breast Cancer Molecular diagnostics<br>83890-83894: Ovarian/Breast Cancer Molecular diagnostics<br>83896-83898: Ovarian/Breast Cancer Molecular diagnostics<br>83900-83909: Ovarian/Breast Cancer Molecular diagnostics<br>83912: Ovarian/Breast Cancer Molecular diagnostics<br>88271-88272: Molecular cytogenetics<br>99401-99402: Preventive medicine counseling<br>S3818: Complete gene sequence analysis; BRCA1 gene<br>S3819: Complete gene sequence analysis; BRCA2 gene<br>S3820: Complete BRCA1 and BRCA2 gene sequence analysis for susceptibility to breast and ovarian cancer<br>S3822: Single mutation analysis for susceptibility to breast and ovarian cancer<br>S3823: Three-mutation BRCA1 and BRCA2 analysis |
| <b>Gonorrhea, Screening</b><br>Sexually active women only  | 87081: Culture, presumptive, pathogenic organisms, screening only<br>87205: Smear, primary source with interpretation<br>87492: Infectious agent detection by nucleic acid (DNA or RNA)<br>87590-87591: Infectious agent detection by nucleic acid (DNA or RNA)<br>87800-87801: Infectious agent detection by nucleic acid (DNA or RNA)<br>87850: Infectious agent detection by Immunoassay with direct optical observation   |
| <b>Alcohol Misuse Screening and Behavioral Counseling Interventions</b>                            | 96150-96155: Health and behavior assessment and intervention<br>98960-98962: Education and training for patient self-management<br>99386-99387; 99396-99397: Comprehensive preventive services<br>99401-99404: Preventive counseling<br>99406-99409: Alcohol abuse structured screening & brief intervention<br>H0001: Alcohol and/or drug assessment<br>H0004: Behavioral health counseling<br>H0049: Alcohol and other drug screening<br>H0050: Alcohol and/or Drug services  |
| <b>Aspirin for the Prevention of Cardiovascular Disease</b><br>Women age 55-79                     | 99401-99404: Preventive medicine counseling/risk factor reduction   |
| <b>Breastfeeding, Primary Care Interventions to Promote and Support Breastfeeding</b>              | 99401-99404: Preventive medicine counseling/risk factor reduction<br>98960: Education and training for patient self-management  |
| <b>Breastfeeding, Equipment</b><br>One (1) manual breast pump per pregnancy                        | E0602: Breast pump, manual, any type<br>ONLY COVERED WHEN SUBMITTED WITH PRIMARY DIAGNOSIS Z39.1  |

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| <b>Breastfeeding Supplies</b>  | A4281: Tubing for breast pump, replacement<br>A4282: Adapter for breast pump, replacement<br>A4283: Cap for breast pump bottle, replacement<br>A4284: Breast shield and splash protector for use with breast pump, replacement<br>A4285: Polycarbonate bottle for use with breast pump, replacement<br>A4286: Locking ring for breast pump, replacement<br><br>ONLY COVERED WHEN SUBMITTED WITH PRIMARY DIAGNOSIS Z39.1  |
| <b>Diet, Behavioral Counseling in Primary Care to Promote Health</b> | 99402-99404: Preventive medicine counseling/risk factor reduction, individual<br>99411-99412: Preventive medicine counseling/risk factor reduction, group<br>98960: Education and training for patient self-management<br>S9470: Nutritional counseling, dietician visit   |
| <b>HIV, Screening</b>  | 86689: HTLV or HIV antibody, confirmatory test<br>86701: HIV-1 antibody<br>86702: HIV-2 antibody<br>86703: HIV-1 and HIV-2 antibody, single assay<br>87389: HIV-1 antigen(s), with HIV -1 and HIV-2 antibodies, single result (One (1) code allowed per calendar year)<br>87390: Infectious agent antigen detection by enzyme immunoassay<br>87391: Infectious agent detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple step method; HIV- 2 (One (1) code allowed per calendar year)<br>87534-87536: Infectious agent antigen detection by nucleic acid (DNA or RNA)<br>S3645: HIV antibody testing of oral mucosal transudate |
| <b>Sexually Transmitted Infections, Counseling</b>                   | 99401-99404: Preventive medicine counseling/risk factor reduction<br>99411: Preventive medicine counseling/risk factor reduction   |
| <b>Syphilis Infection, Screening</b>                                 | 86592-86593: Syphilis test<br>86781: Antibody<br>87166: Dark Field examination<br>87164: Dark Field examination<br>87285: Treponema pallidum antigen   |

| PROCEDURE/FREQUENCY   | CPT CODES ACCEPTED FOR EACH PROCEDURE  |
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| <b>Contraception Counseling and Coverage</b>  | J7298: Levonorgestrel-Releasing Intrauterine Contraceptive System, 5 year device<br>J7301: Levonorgestrel-Releasing Intrauterine Contraceptive System<br>J7303: Contraceptive supply, hormone containing vaginal ring, each<br>J7304: Contraceptive supply, hormone, containing patch, each<br>J7306: Levonorgestrel (contraceptive) implant system, including implants and supplies<br>J7307: Etonogestrel *contraceptive) implant system, including implant and supplies<br>96372: Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular<br>11981: Insertion, non-biodegradable drug delivery implant<br>11982: Removal, non-biodegradable drug delivery implant<br>11983: Removal with reinsertion, non-biodegradable drug delivery implant |
| <b>Insertion of intrauterine Device</b><br><br>One (1) device and insertion every five (5) years  | 58300: Insertion of intrauterine Device<br>J7300: Intrauterine Copper Contraceptive<br>S4989: Contraceptive intrauterine device (e.g., Progestacert IUD), including implants and supplies  |
| <b>Inpatient/Outpatient Tubal Ligation</b>  | 58565: Bilateral Fallopian tube cannulation to induce occlusion by placement of permanent implants<br>58600: Ligation or transection of fallopian tube(s), abdominal or vaginal approach, unilateral or bilateral<br>58605: Ligation or transection of fallopian tube(s), abdominal or vaginal approach, postpartum, unilateral or bilateral, during same hospitalization<br>58611: Ligation or transection of fallopian tube(s) when done at the time of cesarean delivery or intraabdominal surgery<br>58670: Laparoscopy, surgical, with fulguration of oviducts (with or without transection)<br>58671: Laparoscopy, surgical; with occlusion of oviducts by device (e.g., band, clip, or falope ring)<br>00851: Anesthesia, tubal ligation/transection  |
| <b>Hepatitis C (HCV) Screening</b><br><br>Ages 48-68<br>One procedure(1) per lifetime   | 86803: Hepatitis C Antibody  |
| <b>Lung Cancer Screening</b><br><br>One (1) per year, smokers with history of at least thirty (30) pack years and who have quit within the previous fifteen (15) years. Ages 55-80. | G0296: Counseling visit to discuss need for lung cancer screening using low dose Computed Tomography (CT) scan<br>G0297: Low Dose CT scanning<br>S8032: Low Dose CT screening<br><br>ONLY COVERED WHEN PRECERTIFIED AND SUBMITTED WITH PRIMARY DIAGNOSIS Z12.2 OR Z87.891  |